

THE STATE OF MONTANA

Commissioner of Political Practices  
1205 Eighth Avenue  
Post Office Box 202401  
Helena, MT 59620-2401  
Phone: 406-444-2942  
Fax : 406-444-1643  
www.politicalpractices.mt.gov

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FEB 17 2016

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2016 FEB 19 A 9:09

COMMISSIONER OF  
POLITICAL PRACTICES

HAND DELIVERED ☐

CERTIFIED MAIL ☒

SIGNED/NOTARIZED ☐

## Lobbying

## Complaint Form (10/09)

Type or print in ink all information on this form except for verification signature

### Person bringing complaint (Complainant):

Complete Name Don Hart  
Complete Mailing Address 1004 O'Connell Road  
Bozeman, MT 59715  
Phone Numbers: Work \_\_\_\_\_ Home \_\_\_\_\_

### Person or organization against whom complaint is brought (Respondent):

Complete Name C.B. Pearson and Common Cause Montana  
Complete Mailing Address C.B. Pearson, PO Box 5800, Missoula, MT 59802  
Common Cause Montana, 405 S. 1st St. W, Missoula, MT 59801  
Phone Numbers: Work 406-549-4287 Home \_\_\_\_\_

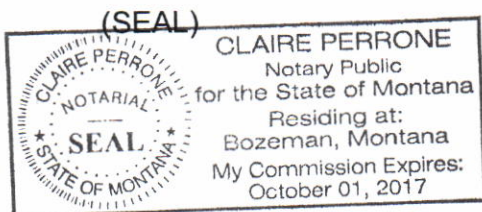
**Please complete the second page of this form and describe in detail the facts of the alleged violation.**

### Verification by oath or affirmation

State of Montana, County of Gallatin

I, DON F. HART, being duly sworn, state that the information in this Complaint is complete, true, and correct, to the best of my knowledge and belief.

Don F. Hart  
Signature of Complainant



Subscribed and sworn to before me this 16 day of  
February, 2016.

Claire Perrone  
Notary Public

My Commission Expires:

**Statement of facts:**

Describe in detail the alleged violation(s) and cite the statute or statutes you believe have been violated. Please attach copies of documentary evidence to support the facts alleged in your statement.

If the space provided below is insufficient, you may attach additional pages as necessary.

Please See Attached

**Complaints must be:**

- signed
- notarized
- delivered in person or by certified mail.

**COMPLAINT TO MONTANA COMMISSIONER OF POLITICAL PRACTICES AGAINST C.B. PEARSON  
and COMMON CAUSE MONTANA**

Senate Bill 289 was a major revision to Montana's campaign finance laws. C.B. Pearson holds himself out as an expert in campaign regulation, and has been an advocate for more reporting and disclosure for many years.

Senate Bill 289 was first heard in the Senate on February 18, 2015. It was the subject of significant floor debate in the Montana State Senate on February 26, 2015, and thereafter was transmitted to the House.

On March 9, 2015, Senate Bill 289 was the subject of significant floor debate in the Montana House. Thereafter, on March 17, 2015, a hearing was held in House Business and Labor. The Bill was subject to additional House Floor debate on March 24, 2015 and March 26, 2015.

The purpose of regulation over lobbyists and their principals is to inform the public of who is influencing legislative activity.

Despite C.B. Pearson's supposed expertise in the area, he violated MCA 5-7-301 by lobbying without a license during the Senate Bill 289 process. In fact, he did not submit a Form L-1 Lobbyist License Application until March 26, 2015 (see Exhibit A) despite being intimately involved with Senate Bill 289 in its earliest stages. In fact, he testified in support of the bill and on behalf of Common Cause Montana at the House Hearing on March 17, 2015, nine days before he applied for a license.

In addition, a principal may not permit lobbying until the lobbyist is licensed and the names are entered on the docket. This constitutes an additional violation by Common Cause as they did not file their L-2 principal authorization statement until March 27, 2015 (see Exhibit B).

This lobbying was not insignificant as Common Cause's L-5 Lobbying Financial Report reported a payment of \$6,000.00 to C.B. Pearson, with the initial cost exceeding \$14,249.00. Clearly, this level of lobbying could not have occurred in a mere three days at the end of March (see Exhibit C). Common Cause's efforts also continued after April 1, 2015, where after they spent over \$10,750.00 (see Exhibit D).

In conclusion, C. B. Pearson and Common Cause should be found in violation of Montana's Campaign regulations and penalized accordingly.

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MAR 24 2015

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2015 MAR 26 A 8 24

COMMISSIONER OF  
POLITICAL PRACTICES

Form L-1 (Revised 12/14)

Lobbyist License Application

To be filed by applicant together with \$150 filing fee

Original Filing



Amended Filing



11 3.30.15

Applicant Information (Please Print)

C.B. Pearson

Full Name of Applicant

P.O. Box 5800 Missoula, MT 59802

Applicant's Complete Business Mailing Address (Including City, State, Zip)

cbpearson@mrss.com

Applicant's E-Mail Address

406-549-2848

Applicant's Business Telephone Number

Principal Information (Please Print)

Common Cause Montana

Full Name of Principal

405 South 1st Street West Missoula, MT 59801

Principal's Complete Business Mailing Address (Including City, State, Zip)

C.B. Pearson

Full Name of Principal's Representative (Signing Authority)

cbpearson@mrss.com

E-Mail Address (Signing Authority)

406-549-4287

Telephone Number (Signing Authority)

Subjects of Legislation applicant is authorized to Promote, Oppose, or Modify:

Campaign Finance Disclosure - SB 289

Date Individual was employed to lobby: 19 March 2015

CERTIFICATION

I, C.B. Pearson, certify that the information provided in this application  
is complete and correct. I further certify that I am not prohibited from lobbying based on previous government  
service (see 5-7-310-MCA). C.B. Pearson 23 March 2015  
Signature of Applicant Date



Check if additional Principals are listed on supplementary pages

Ex. A

THE STATE OF MONTANA

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**Form L-2** (Revised 12/14)  
**Principal Authorization Statement**

Original Filing ☒ Amended Filing ☐

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MAR 25 2015

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2015 MAR 27 A 8 48  
COMMISSIONER OF  
POLITICAL PRACTICES

16330.15

Principal Information (Please Print)

Common Cause Montana

Full Name of Principal

405 South First Street West

Complete Business Mailing Address (including City, State, Zip)

C.B. Pearson

Full Name of Principal's Representative (Signing Authority)

cbpearson@mrss.com

E-Mail Address (Signing Authority)

406-549-4237

Telephone Number (Signing Authority)

Applicant Information (Please Print)

C.B. Pearson

Full Name of Applicant

P.O. Box 5800

Complete Business Mailing Address (Including City, State, Zip)

cbpearson@mrss.com

E-Mail Address

406-549-2848

Telephone Number

Subjects of Legislation the applicant is authorized to Promote, Oppose, or Modify:

Disclosure Laws - SB 289 - Support

CERTIFICATION

I, C.B. Pearson, hereby authorize C.B. Pearson  
Print Full Name of Representative of Principal Print Full Name of Applicant

to act as a Lobbyist for Common Cause Montana  
Print Full Name of Principal

C.B. Pearson  
Signature of Representative of Principal

3-23-2015

Date

Submit

Ex. B



THE STATE OF MONTANA  
**COMMISSIONER OF POLITICAL PRACTICES**  
1205 8th Avenue  
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Fax: 406-444-1643

**Form L-5** (Revised 12/14)

## Lobbying Financial Report

To be filed by the Principal

Original filing ☒

Amended filing ☐

For Office Use Only <b>RECEIVED</b> Date Received  2015 APR 13 A 9:16  COMMISSIONER OF POLITICAL PRACTICES Postmark date (if filed late) <b>POSTMARKED</b> APR 11 2015  4.13.15
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### 2015 Legislative Session Year Report

January 1 - January 31 (due February 15, 2015)	<input type="checkbox"/>
February 1 - February 28 (due March 15, 2015)	<input type="checkbox"/>
March 1 - March 31 (due April 15, 2015)	<input checked="" type="checkbox"/>
April 1 - End of Session (due 30 days after adjournment)	<input type="checkbox"/>
End of Session - December 31 (due February 15, 2016)	<input type="checkbox"/>
If lobbying payments were made this calendar year and previously reported, but <i>no additional payments or contributions have been made or received</i> , check this box and file only this page.	<input type="checkbox"/>
In the event of <i>Special Legislative Session(s)</i> the following will apply:	
Adjournment of Special Session (due 30 days after adjournment)	<input type="checkbox"/>
Non Session Year End January-December 31, 2014 (due February 15, 2015)	<input type="checkbox"/>

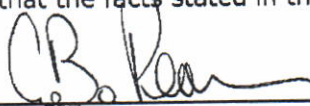
**\*Please read the instructions** before preparing and filing this report. Type or print in ink. All information is required — to better understand the requirements, see § 5-7-208 and 5-7-112, MCA; and § 44.12.202, ARM.

Common Cause Montana

Full name of principal

405 South First Street West Missoula, MT 59801

Complete business mailing address (Including City, State, Zip)

Certification	
I, <u>C.B. Pearson</u>	(Title)
(Please print name of principal's authorized representative)	
certify that the facts stated in this report are true and correct to the best of my knowledge and belief.	
	
SIGNATURE of Authorized Representative of Principal	
4.10.2015	406-549-2848
Date	Phone Number

Ex. C

**Part 1**

Please see the attached instructions to determine who is required to file this form and what must be reported. More detail can be found in §§ 5-7-102, 5-7-112, and 5-7-208, Montana Code Annotated (MCA), and 44.10.202, Administrative Rules of Montana (ARM).

A. During this reporting period payments were made to the following lobbyists. Payments include salaries and fees, allowances, rewards, and contingency fees. Reimbursement for personal living expenses do not have to be reported.

Full Name of Lobbyist Paid (Please Print)	Date lobbyist will cease to represent Principal
M+R - C.B. Pearson	6.1.2015

*If additional space is required, provide information on a separate sheet and attach it to report.*

B. This reporting period, the following payments were made: Amount Paid

Total reportable payments to lobbyists (those listed in section A above)	\$ 6,000.00
Total payments to individuals other than registered lobbyists employed or retained to lobby or to support or assist lobbying activity.	
Travel expenses	\$299.43
Advertising (include production costs)	
Entertainment (Include all food and refreshments)	
Communication (Include phone, fax, e-mail)	\$7,500.00
Postage	0
Printing	0
Other office expenses	\$450.00
Total payments for lobbying activity this reporting period	\$ 14,249.43

List each bill draft request, bill number, and legislative issue for which a major effort was exerted. Provide sufficient detail, i.e. "no-fault insurance," "methane gas regulation," etc., and state the Principal's position.

This part is required in accordance with § 5-7-208(5)(d), MCA. See 44.12.102(6), ARM, for more information.

Issue: LC #, SB #, HB #	Position (support, oppose or modify)
SB 289	Support

If needed, provide additional information on a separate sheet.

List each earmarked contribution and membership fee of \$250 or more paid to the principal to promote, oppose, or modify the introduction or enactment of legislation. Provide the full name of each payer, the issue, and the amount, aggregated from January 1 to December 31.

This part is required in accordance with 5-7-208(5)(c), MCA.

Full name and complete mailing address of member or contributor	Amount	Issue area earmarked
	\$	
	\$	
	\$	

If needed, provide additional information on a separate sheet.

Itemize each separate payment of \$25 or more paid to the benefit of any public official, and each separate payment of \$100 or more paid to the benefit of more than one public official. These benefits must be reported as an expense in Part I.

This part is required in accordance with 5-7-208(5)(b), MCA.

Full name of payee	Benefit amount	Name of official receiving the benefit
	\$	
	\$	

If needed, provide additional information on a separate sheet.

Signature

Do not submit this form to the public. It is for the use of the public.



COMMISSIONER OF POLITICAL PRACTICES

# Lobbyist and Principal Search



INSTRUCTIONS HOW DO I FEEDBACK

Year: 2015-2016 Legislative Session

Principal: Common Cause of Montana

Report: Post Session

Date received: 05/22/2015

## PART I

Required in accordance with MCA 5-7-102, 5-7-112, and 5-7-208

Payments for lobbying activities that exceed \$2,300\* to one or more individuals to promote, oppose, or modify the introduction or enactment of legislation on behalf of the Principal are required to be reported.

\* reimbursement for personal living expenses do not have to be reported

### A. DURING THIS REPORTING PERIOD, PAYMENTS WERE MADE TO THE FOLLOWING LOBBYISTS TO PROMOTE, OPPOSE, OR MODIFY THE INTRODUCTION OR ENACTMENT OF LEGISLATION, OR TO SUPPORT OR ASSIST LOBBYING ACTIVITIES:

(Payments include salaries and fees, allowances, rewards, contingency fees)

Full Name of Lobbyist Paid

Date Registered  
Lobbyist Will Cease  
to Represent Principal

C.B. Pearson

### B. THIS REPORTING PERIOD, THE FOLLOWING PAYMENTS WERE MADE:

Amount Paid (\$)

TOTAL REPORTABLE PAYMENTS TO LOBBYISTS (From Section A)	\$0.00
TOTAL PAYMENTS MADE TO INDIVIDUALS (OTHER THAN REGISTERED LOBBYISTS) EMPLOYED OR RETAINED TO LOBBY OR TO SUPPORT OR ASSIST LOBBYING ACTIVITIES	\$0.00
TRAVEL EXPENSES	\$262.20
ADVERTISING (including production costs)	\$10,484.77
ENTERTAINMENT (including all food and refreshments)	\$0.00
COMMUNICATION (including telephone, fax, e-mail)	\$0.00
POSTAGE	\$0.00
PRINTING	\$0.00
OTHER OFFICE EXPENSES	\$3.60
TOTAL PAYMENTS FOR LOBBYING ACTIVITIES THIS REPORTING PERIOD	\$10,750.57

Ex. D

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**PART II**

Required in accordance with MCA 5-7-208(5)(d)

List each bill draft request, bill number and legislative issue\* for which a major effort\*\* was exerted to support, oppose, or modify the introduction or enactment of legislation, and stating the Principal's position.

\* Describe in sufficient detail to ensure determination of subject, i.e. "no-fault insurance," "methane gas regulation," etc.  
\*\* See Administrative Rules of Montana 44.12.102(6)

ISSUE, LC #, SB #, or HB #

SUPPORT, OPPOSE, OR MODIFY

SB 289

Support

**PART III**

Required in accordance with MC 5-7-208(5)(c)

List each earmarked contribution and membership fee of \$250 or more, aggregated over the period January 1 through December 31, paid to the principal for the purpose of promoting, opposing, or modifying the introduction or enactment of legislation. Provide full name of each payer, amount, and issue area.

Full Name Complete Mailing Address of Member/Contributor	Amount	Issue Area Earmarked
No Entries		

**PART IV**

Required in accordance with MC 5-7-208(5)(b)

Itemize by name of employee and beneficiary, each separate payment of \$25 or more paid to the benefit of any public official and each separate payment of \$100 or more paid to the benefit of more than one public official. Amount of benefit must be reported as an expense in Part I.

Complete Name of Payee	Benefit Amount	Name of Public Official Receiving Benefit
No Entries		

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